



Dear Friends,

"It was a pleasure to see it worked out."

"Who would have believed that such a large group of people could write and unanimously agree on such an important statement in less than 24 hours?"

On May 16 and 17, 1998, members of the False Memory Syndrome Foundation Professional and Scientific Advisory Board met in Philadelphia to discuss the changes that have taken place since the Foundation was formed in March of 1992 and to advise the Foundation on future direction. The assembled group produced a statement that will be published in the July/August newsletter. The concise statement addresses the current status of scientific understanding of "recovered memories," and the continuing need for the Foundation.

At the meeting, the FMSF Directors honored Martin T. Orne, M.D., Ph.D., and Harold I. Lief, M.D. who were instrumental in the founding of the FMSF. Their wisdom and guidance in setting the standards of the Scientific Advisory Board contributed to FMSF's credibility. The Advisory Board is no monolith of opinion about psychiatric issues. On the contrary, the members hold diverse views, but they are unanimous on the importance of applying sound science to these questions.

The last meeting of the Scientific Advisory Board was in 1993. How different things were then. There were few articles or books that raised the essential question of the historical accuracy of "recovered repressed memories" of childhood sexual abuse; and legal cases were decided against parents based only on claims of the special accuracy of such memories.

We now seem to be in a *transition* period of public understanding about recovered memories. For example, most appellate courts have noted that there is insufficient scientific evidence to support the theory of repression but the Arizona Supreme Court in April allowed suits based on this theory to extend the statute of limitations. (The summary and analysis of that decision (p.7) are fascinating reading and document the need for ongoing educational efforts.)

Another example of this transition is the divergent

media treatment of Multiple Personality Disorder (MPD; officially DID for Dissociative Identity Disorder). Its advocates claim that MPD is caused by childhood sexual abuse. A powerful article by Joan Acocella entitled "The Politics of Hysteria" appeared in the April 6, 1998 issue of *The New Yorker*. Acocella notes that the recovered memory movement has done serious damage to feminism by bringing back the old "weak-woman stereotype," and that "the patient forfeits the privileges of being an adult—self-knowledge, moral agency." She minces no words: "If MPD was supposed to rescue insight therapy, it did the opposite: it covered insight therapy with shame." *The New Yorker* critique is so completely devastating that one might conclude that the problem is over.

Television programs, however, give just the opposite perspective. On May 11, 1998, for example, Oprah Winfrey uncritically accepted the belief that mental disorders are the result of sexual abuse. Any association that may exist between past abuse and mental disorders is much more complex. But it has been the handling of MPD that causes this writer anxiety. The MPD movement received a major kick-off in the 1980s because it was presented with the imprimatur of medical authorities. Two television programs in the past half year seem to be doing it all over again.

Last December the daytime talk show *Leeza* featured RaLynne, a mother of four children who was said to have 300 personalities. While Leeza acknowledged that there can be skeptics of this disorder, Stuart Gluck, M.D., the Medical Director of Charter San Jose who treated RaLynne for three years, was presented to confirm the reality of this diagnosis in general and in RaLynne in particular. Throughout the

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The next issue will combine July and August.

program, the camera focuses on the scars on RaLynne's arm, a result of her self-cutting. At the same time RaLynne and her children are seen smiling and laughing. We are given a picture of a normal person with an exotic disorder for whom life now is fine.

Leeza continued with RaLynne the next day. This time Dr. Don Hackenberg, M.D. was the expert psychiatrist. He told the world that RaLynne was a multiple because she had been victimized by a "satanic cult." He told us that we didn't know or understand this because "satanic cults act in secrecy." Again the program showed close-ups of the scars on RaLynne's arm even while portraying her life now as normal. Sadly, RaLynne died in March, 1998.

On March 4, 1998, Prime Time Live featured two segments on MPD reported by Diane Sawyer. The first segment featured Chris Sizemore (the real name behind "Three Faces of Eve") who told us that she developed not just 3 but 22 personalities. What she did not tell Diane Sawyer on television is what was revealed by Acocella in *The New Yorker* that "having MPD was 'fun'—that when she recovered, the 'magic' went out of her life."

In the second segment Sawyer introduced us to an MPD patient named "Lucy," a nurse who told us that she never switches alters when she is on duty at work but who happened to switch during the taping of the program. Her doctor, Richard Moskowitz, M.D., whom we are told has just published a book on the topic and thus is "an expert," authenticates the reality of the diagnosis. Dr. Moskowitz has hospital privileges at Charter Springs Hospital, Florida.

Sawyer told us that two-thirds of those diagnosed with MPD try to take their own lives. (She omitted the fact that these attempts are mostly *after* the diagnosis and memory recovery.) While she said that there are skeptics, she then said that 80 percent of doctors in a recent survey believe in the diagnosis. (The survey was of doctors in veterans' hospitals; other more recent surveys find nothing like this result.) Her chief expert was David Spiegel, M.D. who appeared four times. His father, Herb Spiegel, M.D. appeared just once to say that MPD is greatly over diagnosed and it is an embarrassment to psychiatry. David Spiegel then assured us that MPD is not over-diagnosed.

As long as we continue to have television programs that present MPD and recovered memories in an unbalanced and romantic fashion, we have a problem. We *must* continue our work.

Pamela

HAVE YOU MADE YOUR PLEDGE?

Have you made your contribution to the Foundation's annual fundraising drive? If not, please take a few minutes to think how professionals now recognize what false memory syndrome is and how it devastates families. If you are one of those families, try to imagine what it would have been like if there had been no one to call. Without your support, affected families, former patients, professionals, and the media will have no place to turn. Please be generous. Whatever you are able to contribute is deeply appreciated. To those who have already returned your pledge card, our thanks for helping to ensure that those who need the Foundation's help will continue to receive it.

Mistaken Claims

Claim: The FMS Foundation encourages parents "to sue their own children" (Made by Lynn Henderson in "Suppressing Memory," *Law and Social Inquiry*, Summer 1997.)

Fact: The recommendation that parents should sue their own children has been made by Cynthia Bowman and Elizabeth Mertz. The Foundation, in contrast, has consistently urged family reconciliation. It has never suggested that parents sue their own distressed children who had turned to mental health professionals for help. ("The appropriate individual to sue is the child herself, rather than the therapist, unless the therapist has in fact republished the defamatory information," page 585, Bowman & Mertz (1996) "A Dangerous Direction: Legal Intervention in Sexual Abuse Survivor Therapy" *Harvard Law Review* Vol 109:549. It is surprising that this error appeared since Elizabeth Mertz is one of the editors of *Law and Social Inquiry*. See also Bowman & Mertz, "What Should the Courts do About Memories of Sexual Abuse?", *Judges Journal* Fall 1996.

Claim: The FMS Foundation encourages parents "to picket therapists." (Made by Lynn Henderson in "Suppressing Memory," *Law and Social Inquiry*, Summer 1997.)

Fact: The FMS Foundation has encouraged families and professionals to hold seminars to help educate the public about the problems of FMS. It has encouraged them to see that libraries and bookstores offer books on all sides of this issue. In Seattle, Washington, retired construction worker and registered mental health professional Chuck Noah¹ has chosen to picket as his way to protest. It should be noted that FMSF families and speakers have been picketed in CT, CA, MD, and IL to name just a few places.

1. Noah obtained his "registered mental health professional" status to demonstrate how easy it is to obtain. He believes the State of Washington Mental Health law is a sham.

special thanks

We extend a very special "Thank you" to all of the people who help prepare the FMSF Newsletter. *Editorial Support:* Toby Feld, Allen Feld, Janet Fetkewicz, Howard Fishman, Peter Freyd. *Research:* Merci Federici, Michele Gregg, Anita Lipton. *Notices and Production:* Ric Powell. *Columnists:* Katie Spanuello and members of the FMSF Scientific Advisory Board. *Letters and information:* Our Readers.

Muddled Thinking Continues

FMSF Staff

Each year Jefferson Medical College in Philadelphia hosts a prestigious lecture series in honor of Albert M. Biele. Paul McHugh, M.D. and Lenore Terr, M.D. have been past speakers. This year the featured speaker was psychiatrist Bessel van der Kolk, M.D. whose May 13th talk was titled "Social and Neurobiological Dimensions of Compulsions to Forget and Repeat Trauma." He began his lecture with a brief history of psychiatry's interest in trauma from the early theories of Charcot, Janet and Freud to the current work of Lenore Terr, M.D. and Judith Herman, M.D. He then reviewed several of his own studies on victims of trauma and veterans of combat who had been diagnosed with PTSD.

In his presentation, van der Kolk either did not realize or just neglected to mention the limitations of the research he described. With his own research, for example, he failed to discuss the possible bias of subject selection or whether the trauma reported by his subjects was verified. When discussing other studies, he did not mention methodological strengths or weaknesses. Indeed, participants may have left this lecture with misconceptions about what research has actually shown. Van der Kolk told the audience, for example, that 37% of the subjects in the Linda Meyer Williams 1995 study^[1] forgot abuse. But the Williams study does not provide evidence as to whether subjects forgot or did not report abuse incidents. When factors such as childhood amnesia are accounted for, the Williams results are strikingly reduced.

During the talk, van der Kolk, who is known for his theory of "body memories," endorsed the use of Eye Movement Desensitization and Reprocessing (EMDR) for the treatment of patients diagnosed with

PTSD.^[2]

Do professionals, medical students and residents go to talks expecting accurate information? Or has the age of docudrama encroached on mental health continuing education? The audience's lack of critical questions seemed to indicate that people accepted the conclusions. If this presentation is indicative of the quality of programs offered by medical teaching institutions across the country, the muddled thinking and lack of scientific understanding that has been at the root of the FMS problem will be with us for a long time.

1 William, LM (1995) Recovered memories of abuse in women with documented child sexual victimization histories. *J of Traumatic Stress*, 8(4), 649-673

2 van der Kolk September 9, 1997 Netherlands TV documentary. When asked if EMDR could be used with blind people, van der Kolk stated that the doctor could snap his fingers on each side of a patient's head. He noted that the critical factor is moving from one side to the other. He said that Zulu tribespeople process their trauma by dancing on one foot and then the other. Dr. van der Kolk should be asked for the studies that allow him to make statements such as these.

Press Conference to Kick Off Request for Wenatchee Review

A press conference will be held at the New York Academy of Science on May 27 to publicize the widespread support that now exists for a congressional review of the Wenatchee situation. A coalition of groups has determined that congressional review is needed to determine the conditions that contributed to the excessive prosecutions. Speakers will include Mike Wallace, Arthur Miller, William Styron, Nat Hentoff and many other notables.

Ontario Sues U.S. Firm for 'Luring' Patients over Border

Vancouver Sun, April 7, 1998

The Ontario government is suing Tenet Healthcare Corporation (formerly National Medical Enterprises) for

\$175 million for luring provincial residents to the United States for unnecessary treatments that were then billed to the Ontario Health Insurance Plan. According to the documents filed in a Wisconsin court on April 1, NME sent agents into Ontario to convince patients to enter drug rehabilitation and other psychiatric programs in the United States. The treatment often was not necessary.

Prison Cases to be Reexamined

Canadian Federal Minister of Justice Anne McLellan has agreed to raise the issue of people in prison based only on "recovered memory" evidence at the next meeting of Attorneys General. This is in response to the petition of Alan Gold, President of the Criminal Lawyers Association signed by many prominent citizens. Canadian media coverage has been very supportive of such a review.

Another Look at the APA Working Group's Report: Review of paper by C. Brooks Brenneis

Allen Feld

I find it impossible to be even-handed. The conclusions drawn by the clinicians may be even weaker than assessed by the researchers; conversely, the critique offered by the clinicians of the researchers' evidence is more impassioned than apt. (p. 532, Brenneis, 1997).

I'm guilty of admiring C. Brooks Brenneis' writings. He deals with complex issues in a manner that I find understandable; he is an experienced practitioner with impressive credentials in psychoanalysis; he cuts to the heart of the "recovered memory" issue by stripping away the often passionate debate surrounding it; he understands and is influenced by science in his clinical practice and writings. He also has the courage to speak his convictions. A frequent author in psychoanalytical journals, Brenneis dares to write about issues important to FMSF. He fre-

quently challenges his fellow clinicians to examine their beliefs and recognize how those beliefs often influence the outcome of their therapy.

In 1993, the American Psychological Association appointed six Ph.D. psychologists (three clinicians: Judith L. Alpert, Laura S. Brown, Christine A. Courtois, and three researchers: Stephen J. Ceci, Elizabeth F. Loftus and Peter A. Ornstein) to a Working Group On Investigation of Memories of Childhood Sexual Abuse. Brenneis has critiqued the published results of that working group.[1]

Brenneis argues that clinicians Alpert, Brown and Courtois ignore essential facts about Sigmund Freud's work in pressing their case for "repressed memories." He points out that they have relied on the work of Janet who a century ago developed the unsubstantiated notion that there is a relationship between trauma, dissociation and amnesia. He notes that they are also in error in relying on the theory of Lenore Terr that if trauma is repeated it is more likely to be forgotten than is a single episode. Terr also believes that it is possible to use current symptoms to determine historical events.

Brenneis writes: "Aside from the fact that Terr's notion about forgetting repeated trauma is inconsistent with nearly all that is known about memory, no one has tested this hypothesis in a rigorous way." Rigorous testing, he notes, would "require judges to be blind to individual's histories (trauma, no trauma) to observe their behavior and examine their dreams and accounts of somatosensory experience. Could they divine the nature of the underlying trauma, if it existed?"

Brenneis reviews the anecdotal evidence used by Alpert et al. to support their belief that people frequently forget abuse. He observed that some of the cases they used were based on

media accounts, others had too few details to allow for close examination and still others had so many potential flaws that their accuracy could reasonably be in question. Commenting on one study Brenneis notes, "If this represents the level of documentation so confidently presented by Alpert et al., one may indeed be left with serious questions about the strength of their overall argument." Indeed, this comment is apt for the clinicians' general use of anecdotal evidence.

"If this represents the level of documentation so confidently presented by Alpert et al., one may indeed be left with serious questions about the strength of their overall argument." (p. 537)

Brenneis expresses concern that Alpert, Brown and Courtois do not demonstrate reasonable familiarity with laboratory/empirical research. He cites their use of a 1981 study by Bower as an example. That study was used to support their interpretation of the place that state- or mood-dependent memory plays in helping someone recall alleged abuse. However, as Brenneis points out, in 1989 Bower & Mayer wrote that in six other studies they had been unable to find stable evidence for a mood dependent retrieval effect. Students in their first research course are introduced to the necessity of replicating research to affirm the importance of the findings in the original research. The inability to replicate the 1981 research is ignored by Alpert, Brown and Courtois.

The clinicians' bias against experimental research is evident. Brenneis notes that while they criticize laboratory research as irrelevant to clinical situations, they show no reluctance to use it when they like the results. And, he points out, they actually overstated the value of these results.

Brenneis goes on to introduce the notion of "Mutual influence out of awareness..." that is to be found in

therapist patient interactions. Based on the early work of Martin Orne, he writes about the indirect communications and cues that flow between client and therapist and about the embedding of beliefs that are out of awareness. At the same time, Brenneis is accurately aware and appreciative that the therapeutic process depends on the important interactions between therapists and clients.

Brenneis has no trouble separating scientific skepticism and critical examination from disbelief in stories of true victimization. He reminds Alpert, Brown and Courtois that their "uncritical... interpretations of the assembled evidence may, paradoxically, enhance the 'disbelief in victims stories'".

Brenneis concludes by pointing out that people are often resistant to change even in the face of contrary evidence. "We are emotionally invested in our cherished beliefs and resist altering them," he writes.(p. 543) While both the clinicians and the scientists defend their views with passion, Brenneis perceives that the clinicians "weigh their [own] evidence far too heavily and that of the researchers far too lightly" (*ibid.*). It is difficult separating cherished beliefs of clinicians from clinical evidence. Recovered memories may reflect the cherished beliefs of the clinicians who help recover them..

1. Brenneis, C. B., Final report of APA Working Group on Investigation of Memories of Childhood Abuse: A critical commentary. *Psychoanalytic Psychology*, 14(4), 531-547.

Allen Feld is Director of Continuing Education for the FMS Foundation. He has retired from the faculty of the School of Social Work at Marywood University in Pennsylvania.

Newsletter readers may find the following book by C. Brooks Brenneis of interest: *Recovered memory of trauma: Transferring the present to the past.* International Universities Press, 1997.



Smiling through Tears

Pamela Freyd and Eleanor Goldstein
Upton Books (800-232-7477)
\$14.95

The book for family and friends

Over 125 cartoons by more than 65 cartoonists lead the way through a description of the complex web of psychological and social elements that have nurtured the recovered memory movement.

"At once both thoroughly informative and devastatingly witty."

Alan Gold, Criminal Defense Attorney,

"I think the book is terrific. I liked it because it supported a lot of the opinions I've had on psychiatry, cults, brain-washing and other ideas mentioned in the book."

Mort Walker, Creator of *Beetle Bailey*

"It's a must read."

Elizabeth Loftus, Ph.D., Author of
The Myth of Repressed Memory

Psychology Astray:

Fallacies in Studies of "Repressed Memory" and Childhood Trauma

by Harrison G. Pope, Jr., M.D.
Upton Books (800-232-7477)
\$12.95

The book for professionals

This is an indispensable guide for any person who wants or needs to understand the research claims about recovered memories. A review by Stuart Sutherland in the prestigious *Nature* magazine (July 17, 1997) says that the book is a "model of clear thinking and clear exposition." The book is an outgrowth of the "Focus on Science" columns that have appeared in this newsletter.

False Accusations Harm Community

It is time to focus on the totality of harm: to make the public aware that the source of a false accusation harmful to an individual and/or a family is also the source of equal and coextensive harm to a community.

Leah M. Franklin, February 17, 1998

B O O K

REVIEW

Memory Mayhem in Australia

We save our forests -

Let's save our family trees

by June and Ken Godwin
181 pages. Private printing.

The authors will make this book available to those FMSF members who are interested. Write to Editor, FMSF Newsletter for information. Cost is \$15.00 Australian plus postage.

Memory Mayhem in Australia: We save our forests - Let's save our family trees chronicles media and legal repressed memory events in Australia from 1992 through the end of 1997. Bringing the chronology to life with family stories and many quotes, this book will serve as an invaluable resource to historians and sociologists studying the international spread of a belief system and how it was interpreted within a particular culture and government.

The book is not a scholarly tome but rather a very personal account that incorporates media and legal information to support the authors' purpose: "to record how ordinary well-integrated families were blown apart by the rebirth of Freudian-type psychotherapy" (page 110).

According to the authors, 1994 was a watershed year for FMS in Australia: the Australian False Memory Society was formed; the Bunbury case came to public attention (see FMSF Newsletter January 1995); and Richard Guilliatt published articles that later became *Talk of the Devil* 1996 (see FMSF Newsletter June 1997). In 1994, the authors attended the FMSF and John Hopkins Memory and Reality: Reconciliation conference (Baltimore) and the chapter describing the conference is the most complete account available.

The authors believe that the crisis is waning in Australia. Not only did the Australian Psychological Society come out with very strong and very clear

guidelines (see FMSF Newsletter June 1995), but others in positions of authority have had the courage to speak out. Their optimism may be premature, however, as there have been a number of recent reports of American recovered memory and MPD therapists on speaking tours in Australia.

In support of their view that Australia is becoming more sensible, the authors note that the most notorious day care case in Australia, "Mr. Bubbles," has been exposed as a fraud. Dr. Schlebaum, one of the doctors responsible for the prosecutions in that case, appeared before a government commission in late 1996 and wept as she admitted that she had presented false evidence in letters to parents of children attending a kindergarten. Among other things, she had alleged that cannibalism had been witnessed by the children.

The FMS phenomenon in Australia has both similarities and differences with that experienced in North America. Ultimately, however, the unnecessary human suffering caused by professional arrogance and ignorance of science and an abandonment of reason is at the heart of the FMS problem. □

\$950,000 Damages for Couple in 'Mr. Bubbles' case

Sydney Morning Herald, 2/1/98

In 1988, the police in New South Wales charged Dawn and Tony Deren, the owners of the Seabeach Kindergarten, with sexual abuse of five children in a case that came to be known as "Mr. Bubbles." After a 6-week committal hearing in November 1989, all charges of sexual assault were dismissed against them.

The Derens filed five defamation actions after police allegations were published in newspapers. The Deren's lawyer said public comments reported to have been made by police would have established their guilt in the minds of ordinary readers. The award of \$950,000 (Australian) is the first suit to be decided.

FMSF Staff

Federal Judge Dismisses Sex Abuse CasesSmith v. O'Connell, et al., Kelly v. Marcantonio, et al., 1998U.S. Dist. LEXIS 3456, March 17, 1998.¹

In March 1998, the U.S. District Court for Rhode Island dismissed three suits filed by men who allege they were sexually abused as teenagers by priests. All of the suits were filed more than 8 years after the alleged abuse occurred and more than 5 years after the plaintiffs attained the age of majority. Therefore, the suits are time-barred under Rhode Island law unless the limitations period is tolled by either of two provisions of the statute of limitations: 1) where claimants' reasons for delay in filing constitute a condition of "unsound mind";² and/or 2) where the failure of church officials to disclose their alleged knowledge of previous sexual misconduct by the priests amounted to "fraudulent concealment." The plaintiffs were required to meet the burden of establishing that their claims met these provisions.

Plaintiffs alleged their delay in filing was due either to a temporary inability to remember alleged acts of abuse or difficulty in overcoming a reluctance to "re-live" the matter by initiating legal action. Following a review of Rhode Island case law, the federal court found that these claims did not meet the statutory definition of "unsound mind" and so could not toll (extend) the statute of limitations. The court defined "unsound mind" as a person who is incompetent or incapable of managing daily affairs. The court noted that this definition "provides a relatively reliable and objective test." On the other hand, the court explained, expanding "unsound mind" to the conditions claimed by the plaintiffs would "lead to inconsistency and uncertainty; would open the door to stale and fraudulent claims and would create an exception that swallows the rule....It would transform 'unsound mind' into an amorphous concept requiring an individualized and highly subjective determination in every case as to whether a particular condition qualifies and, if so, whether and how long a particular plaintiff, in fact, suffered from that condition. The difficulty of making that determination would be compounded by the fact that it necessarily turns on facts that no longer exist." A more subjective definition of "unsound mind" would lead to several difficulties including the problem of rebutting a plaintiff's claims regarding a past psychological condition probably based on testimony from experts who never examined the plaintiff when the condition allegedly existed.

The federal court, reviewing Rhode Island law, held that "fraudulent concealment"³ of a cause of action requires

something more than a defendant's failure to volunteer information that might be useful in proving that defendant liable for a tortious act. In this case, the plaintiffs did not allege fraudulent misrepresentation and the court held that an alleged "mere silence or a failure to volunteer information does not amount to an actual misrepresentation."

The court, therefore, granted the defendants' motions for summary judgment. Plaintiffs' attorney Carl P. DeLuca said he would appeal the decision. There are 43 similar lawsuits filed in both federal and state courts in Rhode Island.

1 For history, see Smith v. O'Connell, 986 F. Supp. 73, 1997 736515 (D.R.I., 1997).

2 Many states extend the limitations period for persons who are of "unsound mind." How that term is defined varies from state to state and generally means that a person is either unable to function in normal life or is unable to understand her legal rights. Very few courts have found a repressed memory claim to toll the statute of limitations under this provision. See FMSF Working Paper for details.

3 No defendant may use a statute of limitations defense if they fraudulently concealed or misrepresented material facts so as to mislead the plaintiff into believing that no cause of action existed until the limitations period expired.



Florida Appellate Court Affirms Dismissal of "Traumatic Amnesia" Claim

Hearndon v. Graham, 1998 Fla. App. LEXIS 3754, 4/14/98.

In April 1998, a Florida appeals court affirmed dismissal of a suit in which the claimant, aged 32, alleged that she suffered from "traumatic amnesia" or a related syndrome caused by sexual abuse by her stepfather from the time she was 8 until she was 15. The court also certified a question to the Florida Supreme Court for a ruling on whether cases alleging child abuse in which the claimant alleges "traumatic amnesia" caused by the abuse would toll the statute of limitations under delayed discovery doctrine.

In so doing, the appellate court noted that the Florida Supreme Court had not yet considered a repressed memory claim. In 1989, a Florida Appellate Court⁴ dismissed a child sexual abuse claim in which the claimant allegedly had repressed but "rediscovered" memories of abuse when she sought psychological counseling just prior to filing the complaint. That appeals court also held that the alleged incestuous acts, if taken as true, damaged the appellant at the time they occurred and therefore held that the action was time-barred as a matter of law.

The Hearndon court felt that recent decisions in related areas by the Florida Supreme Court indicated that the court might treat the "traumatic amnesia" alleged in this case differently from the "rediscovered memories" alleged in Lindabury. The court also wanted confirmation from the Florida Supreme Court that the discovery rule statute enacted in 1993 could not be applied retroactively to revive a claim which was already time-barred under a previous statute.

4 Lindabury v. Lindabury, 552 So.2d 1117 (Fla.3d DCA 1989).

Arizona Supreme Court Holds That Discovery Rule Applies to Repressed Memory Claim

Doe v. Roe, 1998 WL 157004, April 7, 1998.

In April 1998, the Arizona Supreme Court held that the discovery rule applies to a claim of repressed memory of sexual abuse. The court also concluded that there is a genuine issue of material fact with respect to when the plaintiff discovered her claim and whether she was of unsound mind and thus incapable of bringing a claim. Both questions, the court said, cannot be determined on a summary judgment motion and are questions for a jury to decide. In so ruling, the Arizona Supreme Court reversed an earlier ruling by the Arizona Court of Appeals⁵ and remanded the case to the trial court.

Because of the atypical approach taken by the court, we will summarize the claims it relied on and point out areas of divergence with the majority of appellate court rulings on similar issues. Although the court noted that Arizona statutes of limitations were adopted from very similar Texas statutes, the court did not cite the Texas Supreme Court⁶ decision interpreting those statutes. The Texas Supreme Court had before it extensive submissions and expert testimony regarding the scientific status of "recovered" memories. The Arizona Supreme Court did not. In fact, the issue had not been raised by either party.⁷ The court's long discussion of the repressed memory/false memory debate was, therefore, uninformed by expert testimony and the cases cited were not representative.

Plaintiff Jane Doe claimed that it was not until age 30 that she recalled sexual abuse by her father from age 8 to 15. In 1989 (nearly 3 years prior to filing), she claims she had a flashback of her father sexually assaulting her. She sought therapy immediately and began to recall additional events of brutal abuse which she discussed only with her therapist, though the record does not specify the dates these new images emerged. In June 1990 (slightly under 2 years prior to filing) she disclosed an "especially heinous incident" to her therapist, but claimed she "still remembered only a fraction" of the alleged abuse. The court emphasized that according to Plaintiff prior to June 1990, she was "in denial" and "not ready to talk" about the abuse or to "deal with it." Doe's therapist

DO THE MAJORITY OF STATES IN THIS COUNTRY APPLY THE DISCOVERY RULE TO SEXUAL ABUSE CASES?

The Arizona Supreme Court listed rulings from 16 states which, it said, showed that the majority of states do apply the discovery rule to sexual abuse cases. Such a list is misleading because it does not consider recent decisions from state supreme courts in **Maryland, Michigan, Minnesota, Pennsylvania, South Dakota, and Wisconsin** which clearly *refused to apply the discovery rule* to repressed memory claims.¹ Nor were similar appellate decisions from courts in **Florida, Illinois, New York, and Tennessee** mentioned.² Especially relevant, but overlooked by the Arizona Supreme Court, were a **Rhode Island** decision³ which held that one of the requirements for extending the statute of limitations is a determination of the reliability of repressed recollection theory; and the **Texas** Supreme Court ruling⁴ which held that in order to apply the discovery rule, the wrongful event and injury must be "objectively verifiable" as well as inherently undiscoverable. Two recent rulings, one in **Illinois**⁵ and the other from the **Iowa** Supreme Court⁶ are particularly relevant to the issues before the Arizona Court. Neither was mentioned. Both rulings rejected the continuing tort approach in which a new cause of action is allowed for each new "memory." Nor did the Arizona court mention decisions by the **Alabama** Supreme Court⁷ or the **Michigan** Supreme Court⁸ which held that alleged repressed memories do not qualify as disability to extend the statute of limitations. Finally, the court may have found the **New Hampshire** Supreme Court's detailed ruling⁹ which followed extensive pretrial evidentiary hearings instructive. The New Hampshire court found testimony based on "repressed memory" to be "insufficiently reliable to be admitted at trial."

Not all of the 16 jurisdictions cited by the court as applying the discovery rule actually do so. A 1996 decision from Maine's Supreme Court, while cited as applying the discovery rule,¹⁰ actually does no such thing. As the Supreme Court of Maine explained in 1997,¹¹ "Within recent years, we have *declined* requests in sexual abuse cases (to adopt a judicially crafted discovery rule) see *Nuccio* and *McAfee*, and plaintiff offers no compelling reason to reexamine our carefully considered precedent." (emphasis added)

An early Wisconsin Appellate Court decision,¹² often cited nationally as allowing claims of incest to proceed to trial long after the alleged event, was codified in 1987. Since then the **Wisconsin** Supreme Court has considered "repressed memory" claims twice, finally overruling the Appellate ruling. In 1995, it cautioned that the discovery rule should apply "only when allowing meritorious claims outweighs the threat of stale or fraudulent actions." The court further stated that it was not convinced that "even careful cross-examination in this esoteric and largely unproved field is likely to reveal the truth."¹³ Then in 1997, the court unequivocally held, "as a matter of law we conclude that it would be contrary to public policy, and would defeat the purposes of limitations statutes, to allow claims of repressed memory to invoke the discovery rule and to indefinitely toll the statutory limitations for these plaintiffs...The measured response of our legislature supports this conclusion."¹⁴ It is unclear why neither of these recent rulings were cited by the Arizona court.

averred that Doe was "very committed to her recovery."

The court concluded that these assertions were sufficient to fall under the due diligence requirement of the discovery rule. In addition, it said a jury could find plaintiff of "unsound mind" based on the claims. The court assumed that the process of memory repression and recall has been demonstrated through empirical research and that victims of sexual abuse may experience partial recall of repressed memories over long periods of time. Therefore, the court concluded that determination of when Plaintiff's knowledge and acceptance was sufficient to constitute a cause of action is a question for a jury to decide. The court held that the case could not be dismissed on a summary judgment motion.

Similar claims have been decided by some 200 appellate courts. A review of 80 appellate rulings also considering summary judgment motions shows that 3/4 were dismissed outright and over half of the remaining decisions were remanded to the trial court for a determination, using objective standards, of the date of discovery or of the status of plaintiff's mental state. The overwhelming majority of courts, hearing claims not unlike those before the Arizona court, have held that the statute of limitations is not tolled under disability exception. Specifically, an "inability to communicate," or a state of "denial" does not meet the objective standard other jurisdictions apply. Nor have the majority of jurisdictions, as the Arizona court suggests, applied the discovery rule to similar claims. Finally, because neither party briefed the question of the validity of repressed memory, the court's discussion should be taken as dicta, that is, observations which are not binding on the case in question. It is not clear how the Arizona court's approach will, as it hopes, achieve "a reasonable degree of rationality and consistency."

5 *Doe v. Roe*, 1996 Ariz App. LEXIS 169. See FMSF Newsletter Sept. 1996.

6 *S.V. v. R.V.*, 933 S.W.2d 1 (Tex., 1996) (The scientific community has not reached consensus on how to gauge the truth or falsity of "recovered" memories, therefore, statute of limitations not tolled unless the event and injury were, among other things, "objectively verifiable.")

7 Defendants stated that in the event of remand, they preserved the right to object to evidence of repressed memory on the ground that it does not conform to accepted scientific theory and is therefore inadmissible under *Frye v. United States*, 293 F. 1013 (D.C. Cir., 1923).

(continued from page 7)

Other courts, when faced with the discovery rule question, have declined to apply the discovery rule to the specific "repressed memory" allegations presented and have declined to judicially adopt the discovery rule to "repressed memory" claims in general.¹⁵ The **South Carolina Supreme Court**¹⁶ stated unequivocally that it could not apply the discovery rule without authority from the legislature. An early Illinois appellate decision was cited by the Arizona court as among those jurisdictions applying the discovery rule. However, the court failed to mention that the decision was reversed when it was reheard in 1991.¹⁷ It also failed to mention a ruling by the **Illinois Supreme Court**¹⁸ last year which not only affirmed dismissal of a "repressed memory" claim based on the facts alleged, but also pointedly declined to rule on whether or not the discovery rule applied. Similarly, in 1992 the **Oklahoma Supreme Court**¹⁹ stated, "nor do we formulate any specific rule governing the application of the discovery rule to sexual abuse cases." The court held that the discovery rule did not apply to the repressed memory suit before it. Soon after, the Oklahoma legislature, responding to the concerns voiced in that decision, enacted a statute mandating that actions for child sexual abuse be based on objective, verifiable evidence of both the abuse and the suppression of memory of abuse.

It should be noted that some jurisdictions do apply the discovery rule to "repressed memory" claims—but only where stringent restrictions are met. For example, the **Nevada Supreme Court**²⁰ held that absent clear and convincing evidence of the abuse, the discovery rule does not apply. The **Indiana Supreme Court**,²¹ in determining whether to grant summary judgment, considered whether defendant's conduct amounted to fraudulent concealment of material facts from plaintiff and whether plaintiff exercised due diligence in bringing the action.

In 1994, the **New Hampshire Supreme Court**²² emphasized that on remand, plaintiff carries the burden to substantiate allegations of abuse "and, if challenged, to validate the phenomenon of memory repression itself and the admissibility of evidence flowing therefrom." However, following two 1997 New Hampshire Supreme Court decisions,²³ it appears that even were the NH statute of limitations tolled, testimony based on "repressed memory" would not be admissible at trial.

Of the remaining rulings cited by the Arizona court, several courts remanded the cases for a determination of when the plaintiff objectively could have discovered her cause of action.²⁴ For example, courts applying **New Jersey law**²⁵ have typically ordered a so-called Lopez hearing to determine the plaintiff's mental state and have specifically found a therapist's affidavit insufficient to meet the plaintiff's burden of showing existence of disability.

In 1994, the **Ohio Supreme Court**²⁶ held that a 1-year discovery ruled applies to "repressed memory" cases. Since then, 11 Ohio Appellate Courts have considered similar cases (most on summary judgment motions). Even applying the discovery rule, 10 appellate courts have affirmed dismissal of the claims and one remanded the matter for further proceedings to determine the dates of recall. In most of the remaining jurisdictions, the case law has not been settled by a state supreme court decision, and state appellate court rulings currently rep-

resent a wide range of views.

It is, therefore, clearly not the case that the majority of jurisdictions apply the discovery rule to "repressed memory" claims. On the contrary, most recent appellate decisions have strongly cautioned against accepting repressed memory claims because of the unknown reliability of the repression theory and the lack of reliable methods of determining the truth of a "repressed memory" claim absent corroboration. Many courts have, therefore, refused to apply the discovery rule to repressed memory claims.

1 *Doe v. Maskell*, 679 A.2d 1087 (Md., 1996), cert. denied 117 S.Ct. 770 (1997); *Lemmerman v. Fealk*, 534 N.W.2d 695 (Mich. 1995); *Blackowiak v. Kemp*, 546 N.W.2d 1 (Minn. 1996); *Dalrymple v. Brown*, 1997 WL 499945 (Pa. 1997); *Shippen v. Parrott*, 506 N.W.2d 82 (S.D. 1993); *Doe v. Archdiocese*, 565 N.W.2d 94 (Wis. 1997).

2 *Lindabury v. Lindabury*, 552 So.2d 1117 (Fla. App. 1989); *M.E.H. v. L.H.*, 669 N.E.2d 1228 (Ill.App. 1996), aff'd 1997 WL 562001; *Burpee v. Burpee*, 578 N.Y.S.2d 359 (N.Y. Supp. 1991), aff'd, 950 P.2d 721 (3d Cir. 1991); *Hunter v. Brown*, 1996 WL 57944 (Tenn.App., 1996) aff'd 1997 Tenn. LEXIS 540.

3 *Kelly v. Marcantonio*, 678 A.2d 873 (R.I., 1996).

4 *S.V. v. R.V.*, 933 S.W.2d 1 (Tex. 1996).

5 *M.E.H. v. L.H.*, supra.

6 *Woodroffe v. Hansencleaver*, 540 N.W.2d 45 (Iowa, 1995).

7 *Travis v. Ziter*, 681 So.2d 1348 (Ala. 1996).

8 *Lemmerman v. Fealk*, supra.

9 *New Hampshire v. Hungerford*, 1997 WL 358620 (N.H. 1997); *New Hampshire v. Walters*, 1997 WL 937024 (N.H. 1997).

10 *Nuccio v. Nuccio*, 673 A.2d 1331 (Me. 1996).

11 *Harkness v. Fitzgerald*, 1997 Me 207 (1997).

12 *Hammer v. Hammer*, 418 N.W.2d 23 (Wis. App. 1987), rev. denied, 428 N.W.2d 552 (Wis. 1988).

13 *Britzloff v. Archdiocese*, 1995 WL 383226 (Wis.).

14 *Doe v. Archdiocese*, 565 N.W.2d 94 (Wis. 1997).

15 See, e.g., *Wolford v. Mollett*, 1995 Ky.App. LEXIS 90, (Affirmed dismissal and stated, "We do not address the issue of whether the delayed discovery rule should be made applicable to repressed memory cases involving childhood sexual abuse."); *Doe v. Roman Catholic Church*, 656 So.2d 5 (La. App.) cert. denied, 662 So.2d 478 (La. 1995), "(Louisiana courts have not yet fully addressed the specific question of whether prescription is suspended when all memories of sexual abuse are repressed" and affirmed dismissal based on the record.)

16 *Doe v. R.D.*, 417 S.E.2d 541 (S.C. 1992).

17 *Johnson v. Johnson*, 701 F. Supp. 1363 (N.D. Ill. 1988); *Johnson v. Johnson*, 766 F.Supp. 662 (N.D.Ill. 1991). In 1991, the Illinois appellate court held the repressed memory claim to be time-barred and that the counselor's diagnosis regarding plaintiff's alleged disability did not raise a triable issue since the counselor's association with the woman began long after the alleged events and nearly 20 years after she reached the age of majority.

18 *M.E.H. v. L.H.*, supra.

19 *Lovell v. Keohane*, 831 P.2d 624 (Okla. 1992).

20 *Petersen v. Bruen*, 106 Nev. 271, 792 P.2d 18 (Nev. 1990).

21 *Fager v. Hundt*, 610 N.E.2d 246 (Ind. 1993).

22 *McCollum v. D'Arcy*, 638 A.2d 797 (N.H., 1994). Similar approach taken by, e.g., *Peterson v. Huse*, 1996 WL 411851 (N.D.) ("Because of the potential unreliability of some recovered memories, courts should seek to employ reasonable safeguards to ensure the proper use of such memories."); *Olsen v. Hooley*, 865 P.2d 1345 (Utah 1993) (discussed issues raised because of "dearth of empirical scientific evidence regarding the authenticity and reliability of revived memories" and difficulties in ascertaining accuracy of memories.)

23 *New Hampshire v. Hungerford*; *New Hampshire v. Walters*, supra.

24 *Farris v. Compton*, 652 A.2d 49 (D.C. 1994); *Sheehan v. Sheehan*, 901 S.W.2d 57 (Mo. 1995); *Jones v. Jones*, 576 A.2d 316 (N.J. Super. A.D.), cert. denied, 585 A.2d 412 (N.J. Super. 1990).

25 See, e.g., *Datanni v. Yannelli*, 1995 U.S. Dist. LEXIS 19982, applying New Jersey law.

26 *Ault v. Jasko*, 637 N.E.2d 870 (Ohio, 1994).

Missouri Hypnotherapist Pleads Guilty to Insurance Fraud

State of Missouri v. Lamb, St. Louis Co., Circuit Ct., MO,
No. 96CR-2151A.

On April 23, hypnotherapist Geraldine Lamb pled guilty to three felony criminal charges of insurance fraud and a misdemeanor charge of practicing psychology without a license. Lamb admitted that she submitted falsified bills for insurance payment that stated the patients were treated by two psychologists, when the patients were, in fact, treated by Lamb. Last month each of the psychologists pled guilty to misdemeanor counts for their role in the scheme. Lamb is scheduled to be sentenced in June.

Missouri Attorney General Jay Nixon said, "Geraldine Lamb lacked the training, competence and certification to diagnose the serious mental and psychological disorders that she did." In addition to convincing or coercing some of her patients into believing that they were the victims of ritual or satanic abuse, Nixon said Lamb told some patients they were suppressing memories of abuse and that they must disassociate themselves from their families and friends. Lamb also breached patient confidence by disclosing information about patients to other unauthorized persons.

Nixon obtained a civil court order against Lamb in May 1996 preventing her from counseling and directing Lamb to refer her patients to licensed professionals.



Malpractice Suit Against Nationally Known Author Renee Fredrickson Is Settled

Doe v. Fredrickson, District Ct., Ramsey Co., Minnesota,
No. C6-97-3540.⁸

In mid-May, Renee Fredrickson, psychologist and author of a book on "repressed memories," agreed to pay \$175,000 to a former client who accused Fredrickson of implanting false memories of childhood sexual abuse.

The malpractice suit, filed in April 1997, alleged Fredrickson used hypnosis, guided imagery, dream interpretation, automatic writing, "body memories," misinformation, suggestion, and other "memory recovery" methods to implant terrifying false memories of incest and ritual cult abuse. The plaintiff, listed as Jane Doe, claims Fredrickson used hypnosis on her to "recover memories" without obtaining informed consent. "Had I been informed of the dangers I would never have dreamed of submitting to the procedure,"

Doe stated. As a result of the new "memories" that developed during her 10 months of therapy, Doe states she became suicidally depressed for the first time in her life and made false accusations to her immediate and extended family. Her family relationships were shattered by these accusations.

Doe says therapists need to distinguish between longstanding childhood abuse memories and "recovered memories" created in therapy. "Childhood sexual abuse is a major problem that needs to be addressed," Doe said. "The creation of false memories in therapy is a separate problem that also needs to be solved."

Doe is represented by William Mavity of Minneapolis and R. Christopher Barden. Barden said that his client settled out of court because Fredrickson's total malpractice insurance coverage was capped at \$200,000.

Jane Doe and her husband have also filed a complaint with the Minnesota Board of Psychology. That complaint is still under investigation by the Minnesota Attorney General's Office.

8 See FMSF Brief Bank #138.



George Franklin Case Moves Forward

Franklin v. Terr, 1998 U.S. Dist. LEXIS 6365, April 30, 1998.⁹

George Franklin won a preliminary battle in his effort to avenge a murder conviction based on his daughter's "repressed memory." A federal judge refused to throw out a wrongful prosecution case against San Mateo County District Attorney James Fox and two deputies.

"This case is a very disturbing case," U.S. District Judge Charles Breyer said during arguments. Breyer kept the defendants from the District Attorney's office in the case because of their role in an ill-conceived scheme to elicit a confession from Franklin. Breyer differentiated between the roles attorneys play in prosecuting a case—for which they have absolute immunity from suit—from work they do as investigators.

Before Franklin's 1990 trial, prosecutors sent his daughter to visit her father in jail. As jail personnel monitored their conversation, Franklin's daughter asked leading questions that her father refused to answer and gestured toward a sign that warned inmates that conversations were being monitored. During closing arguments, prosecutors were permitted to use Franklin's gesture as well as his refusal to answer his daughter's questions as proof of his guilt. The prosecutors' attempted sting, Franklin argues, led directly to his conviction. It also deprived him of his right to be represented by counsel at all times.

Franklin's attorneys, Andrew Schwartz and Dennis Riordan, also contend that Franklin's daughter, expert wit-

ness Lenore Terr, sheriff's investigators and prosecutors conspired to suppress from the jury the fact that his daughter used hypnosis to help bring the memory of her playmate's murder to the fore some 20 years after the fact. This charge was dismissed. Also dismissed from the suit were two psychotherapists who served as expert witnesses during Franklin's criminal trial, because immunity is granted to all witnesses.

Franklin spent almost seven years in prison for the murder of his daughter's childhood friend before his conviction was overturned in 1995.¹⁰ His daughter, drawing on supposedly repressed memories of the day of the killing, testified against Franklin. Later, questions were raised about her testimony because many of the details she described had been published in the media years earlier. Franklin has sought to clear his name since his release from jail in July 1996.

9 See FMSF Brief Bank #167.

10 In April 1995, U.S. District Court D. Lowell Jensen overturned Franklin's murder conviction and life sentence and ordered the man free. The First District Court of Appeal upheld the conviction. In April 1998, *The Recorder* cited Judge Jensen's decision in the Franklin case as an example of the judge's knowledge of the law and integrity. In Jensen's dozen years on the federal bench, the senior judge has consistently had one of the lowest reversal rates in the district.



Houston Jury Found No Wrongdoing by Psychotherapist; Juror: "From Day One"

Jones v. Lurie, 125th Dist. Ct., Harris Co., Texas, 95-39005-A.¹¹

On May 4, a Houston jury found psychotherapist Dorothy Lurie not responsible for her patient's mental anguish after she helped the woman recover false memories of murdering babies and cannibalism. The lawsuit, filed in 1995 by Kristi Jones, alleged that the mental-health providers who treated her over a 5-year period implanted false memories and wrongly convinced her that she had multiple personalities. The only defendant at trial was Dr. Lurie, who had treated Jones the longest. The other mental health-providers originally named in the case settled with Jones before the trial started. Though the amounts were supposed to be confidential, Lurie's attorney said that the settlements totaled \$480,000.

"From day one we were all on Dr. Lurie's side and thought Jones had no case, but we were prepared to listen," said one juror quoted in the *Houston Chronicle*. "We couldn't ruin a psychologist's career because of the abuse she (Jones) suffered as a child." Even though the juror said she felt the psychotherapist believed the stories that Jones told her, she still didn't fault the treatment.

During the trial which began April 20, Jones testified that Lurie implanted false memories that Jones' father had impregnated her six times and that not only had Jones killed her own children, but more than 100 others. Jones, howev-

er, had never been pregnant. As she became convinced that she had done these things, she grew increasingly depressed and suicidal. Lurie tried to elicit additional details of the stories, telling Jones her alter egos would reveal them, because the memories were too painful for Jones herself to bear.

Jones' attorney John Osborne said that Lurie never tried to dissuade his client from believing she had been tortured and participated in atrocious acts as a child, but instead pressured her to believe those fantasies. Osborne showed the jury that Lurie once "validated" Jones' stories of cannibalism and murder to a police detective. Lurie admitted telling police that she believed Jones' stories were true and she consistently wrote on insurance forms and government documents that Jones needed to believe the stories that her alter egos told her.

Plaintiff's expert, psychologist Terence Campbell, described areas where, he said, Lurie's practice did not meet the standards established by the American Psychological Association. He said Jones only displayed a minor problem when she first saw Lurie in 1989, which should have been cured with no more than two months of therapy. However, there was no evidence that Lurie ever came up with a treatment plan for Jones or addressed the reason Jones originally entered therapy. He said Lurie had the professional obligation to warn Jones that recovered memories are unreliable, especially since Jones was on psychotropic drugs during three of the sessions.

Jones' attorney showed the jury a videotape from a drug-induced session Lurie had conducted with Jones. Jones was lying in a hospital bed holding a teddy bear as sodium amytal, a barbiturate that produces a hypnotic effect, was being administered to her intravenously by an attending psychiatrist.¹¹ Lurie said to Jones, "I'd like you to go inside. Who's going to come out today?" "Robbie," replied Jones in a dazed and monotone voice, referring to a boy alter ego. Later, Lurie asked Robbie about alleged abuse, using suggestive questions.

The defense argued that Jones' upbringing was troubled and had led to her problems as an adult. They also argued that Lurie followed proper procedures at the time in treating multiple personality disorder. Lurie said her role was not to confront Jones about her stories, but be an "empathic listener" and to accept them so she could begin resolving her internal conflicts.

¹¹ Testimony reported in the *Houston Chronicle*, 4/20/98-5/4/98. See also, *Jones v. Miller*, 1998 Tex. App. LEXIS 398.

¹² The psychiatrist who administered the medication told Lurie he was concerned that she was asking leading questions and refused to work with her if she continued in the future. The psychiatrist wrote that Lurie had a "shared insanity" with Jones because Lurie seemed to believe Jones had been programmed by Nazis with electroshock when she was a child.

UPDATES OF CASES WE ARE FOLLOWING

Souzas Await Decision: Massachusetts Superior Court Judge Elizabeth Dolan allowed Raymond and Shirley Souza to remain under house arrest until she decides whether they should get a new trial. Dolan is also expected to rule on attorney Kevin Nixon's motion that the judge revise the Souza's 9- to 15-year prison sentence and place them on probation, or at least give them jail credit for five years under house arrest.

Amiraults Await Decision: Cheryl Amirault LeFave still awaits a Superior Court ruling considering arguments that children at her family's day care center were questioned improperly.

Wenatchee Case Explores Investigation Leading to False Arrest: As we go to press, the civil rights case against Wenatchee officials concludes its 7th week. Plaintiffs and their families are suing police detective Robert Perez, state social workers, and city and county officials for false arrest and misconduct during an investigation of child abuse. During the course of the trial, Superior Court Judge Michael Donahue has broadened the case's scope. *The Wenatchee World* and the *Seattle Post-Intelligencer* continue to report highlights of trial testimony. Testimony is expected to continue for another 3 weeks.

Testimony was heard from Plaintiffs in the case. Wenatchee police chief Perez was questioned closely about possible conflict of interest when he became the foster parent of two of the girls who eventually became the source of 29,729 counts of child rape against 43 people including the girls' parents. One of the girls testified that she had been abused along with children of 20 adults in her 700 square foot home for weekly sex. When asked, she was unable to provide concrete details. Testimony was also heard from Sarah Doggett, 19, who described her family's experiences during 1994-95. At the time, she said, she was adamant that there was no abuse by her parents, and insisted she was a virgin. Even so, she said, Perez, told her, "We know your dad raped you. Why don't you admit it?" She and her sister were placed in foster care. Her parents were both convicted of child rape and sentenced to 10 years. Those convictions were reversed last year by a state appellate panel which sharply criticized the methods used to gather evidence in that case. Sarah Doggett has filed her own lawsuit over handling of the case. Another 15-year-old child, who said she wanted to testify, will not do so. She had retracted her allegations in 1996, but her guardian and psychiatrist say she is now too fragile to testify. Social workers were questioned about the reasons the children were removed from their families and placed in foster care and about the therapy and interviews given the children.

EINSTEIN WAS RIGHT!

Or, A Few Thoughts on the Eve of the
1998 FMSF Scientific and
Professional Advisory Board Meeting
August Piper Jr., M.D.

Adam Smith once called science "the great antidote to the poison of enthusiasm and superstition." This sentiment may inspire some people. But, with respect to the psychotherapy-induced false-memory phenomenon, I think Einstein struck closer to the mark. He said splitting the nucleus of an atom was easier than crushing a single illogical human belief.

Now hold on! you may object. Why adopt such a sour and crepehanging attitude? After all, just look at what has been wrought in the past few years. See how many academics and scholars have written sober, solidly-researched, thoughtful papers strongly supporting what the FMSF has said all along. See how some of "recovered-memory" therapy's main proponents have begun to move toward the Foundation's positions. See how often courts are striking down the arguments of those advocating this kind of therapy. And see how professional societies in some countries (with the distressing exception of those in the USA) have issued position papers debunking recovered-memory theories and practices. So again: why the pessimism?

Well, we Cassandras have grounds for our gloomy outlook. The accomplishments listed above do indeed represent real strides. But these strides occur on the distant mountaintops, far removed from the lowly trenches and vineyards where ordinary practitioners like me labor, and where much of the recovered- and false-memory mischief occurs. For example, consider the first of the following four reasons for pessimism:

1) I recently admitted a young woman—call her Ms. A—to a hospital to treat her panic disorder. The modern treatment for this condition is both

well-established and generally quite effective. First, medication blocks the panic symptoms. Then the patient repeatedly exposes him- or herself to the panic-inducing stimulus. Simple, effective, straightforward.

But a chart note written by Ms. A's Ph.D. psychotherapist was very distressing. She said the patient needed "to work through her sexual abuse issues." She also opined that the abuse had something to do with the genesis of Ms. A's panic symptoms.

Readers may wonder why this distressed me so much. First of all, when I took Ms. A's history, she had mentioned nothing whatever about sexual mistreatment—which of course made me wonder how significant the "sexual abuse" had been to her. When the therapist interviewed the patient, did she steer the interview toward a discussion of childhood mistreatment?

The second reason for distress: Ms. A had sought hospitalization to be treated for her panic disorder, not for her "sexual abuse issues." Readers should know that a shift in focus such as that recommended by the Ph.D. psychotherapist—that is, from the patient's concerns to the treater's—is a feature of what the professional literature defines as the false memory syndrome.⁽¹⁾

The third reason was more subtle. It had to do with the professional's obligation to keep reasonably abreast of current developments in his or her area of expertise. The therapist was recommending that Ms. A. begin insight-oriented, psychodynamic therapy (psychodynamic psychotherapies link today's symptoms and difficulties to unconscious conflicts rooted in the past). Psychiatric research has conclusively demonstrated—years ago—that whatever other merits these kinds of therapies may have, they are quite ineffective in treating panic disorder. Thus, I was distressed because the therapist was recommending an unnecessary, useless, and possibly harmful

therapy to my patient.

In short, I was vexed to see that Adam Smith's "great antidote" had not been able to filter down even to one of my own colleagues.

2) I would simply not have believed something I saw a few months ago if not for the evidence of my own eyes. The something was an advertisement for "the therapy of the 1990's": "A powerful, safe, and inexpensive technique...for self-healing and self-understanding."

Here, too, readers may wonder why this was so distressing. After all, what could be upsetting about a psychotherapy offering, through hypnosis, a chance to "clarify your life purpose within a few hours and remove any stumbling blocks that may be preventing you from achieving the goals you carefully planned?" Just this: the therapist offering this treatment believes you planned these goals before you were born.

Yep, you got it—the advertisement was for "past life regression therapy."⁽²⁾

The therapist in the advertisement also claimed certification in forensic hypnosis. This gave me a start, because I had thought, based on reading the forensic psychiatric literature, that the courts severely restrict hypnotically-refreshed testimony. They are quite aware of, and quite concerned about, the memory-distorting effect of hypnosis. In fact, in some jurisdictions, hypnotically-enhanced testimony may well be completely disqualified. Now, perhaps I have missed something here, but it seems a waste of money to pay a psychotherapist to do something that gets one's case tossed out of court.

But it isn't just boring old earthly things like legal troubles that one can address in the therapy of the 1990's. Higher matters are of concern:

You are in the earth plane now to do important work. You are a unique

blend of a vast number of existences both physical and non-physical and your present self is but a minute portion of your totality. [Most] of that which is *MOTIVATING* or *RESTRICTING* [emphasis in original] you now emanates from memories that were already installed and active within you when you entered this life. Most therapies [examine only] present life memories. . . and thus treatment becomes lengthy, frustrating, and expensive.

The therapist promises that you can explore some of the following important issues in a past-life regression session: past-life memories that affect your health, awakening past-life abilities, understanding and healing incestuous relationships, death experiences and beyond, and—last but by no means least important—your choice of parents.

3) But do not think, dear reader, that such—shall we say unusual—psychotherapies are found exclusively on the fringe. Oh no. Professionals can get continuing education credit from groups sponsoring conferences and workshops in all manner of psychotherapies—"Past Life Regression Therapy" and "Thought Field Therapy" are just two such examples. Who accredits organizations to offer

continuing education for such therapies? Why, no less than the American Psychological Association (APA).

As the Association notes, authorizing educational credits does not necessarily mean that it endorses these psychotherapies. But one can only wonder about the public's perception. Is perception of such treatments' efficacy affected by even the appearance of APA endorsement? Does the perception encourage the belief that all psychotherapies are created equal, that "all have won and all must now have prizes"?

Such a belief would be exceedingly unfortunate: simply put, some therapies work better than others.

4) A final reason for pessimism: the tenacity with which some advocates of improper psychotherapy adhere to their treatment models. In the teeth of a flood of adverse publicity, and amidst a blizzard of lawsuits, they hold their positions. As an example, one psychotherapist was encouraging his patients to believe they and their parents had participated in all the assorted horrors of recovered-memory therapy: you know—the usual barbequings of live babies; ritual sex with children and animals; marriages to satan; and various beheadings, mutilations and disembowelments. Some years ago he nearly lost his license because of such practices. Nevertheless, he still maintains, even today, that his therapy techniques were proper. He is not unique. Several psychiatrists adopt this same public stance—despite having lost several big-figure "recovered-memory" lawsuits.

* * *

I am writing this column en route to the FMSF Professional and Scientific Advisory Board meeting. The meeting was called to plan the organization's future. One obvious question will doubtlessly be asked at this meeting: is there still need for the

work of the FMSF?

Can anyone reading these four reasons for pessimism fail to see the answer?

P.S. Does anyone know the exact wording of the Einstein quote? And did Einstein actually say that?

[1] See de Rivera (1997). The Construction of False Memory Syndrome: The Experience of Retractors. *Psychological Inquiry* 8, 271-292 (p. 271).

[2] Those interested in this subject might wish to read Stevenson (1994). A Case of the Psychotherapist's Fallacy: Hypnotic Regression to "Previous Lives." *American Journal of Clinical Hypnosis* 36, 188-193.

August Piper Jr., M.D., is the author of Hoax and Reality: The Bizarre World of Multiple Personality Disorder. He is in private practice in Seattle and is a member of the FMSF Scientific Advisory Board.

In his next column Dr. Piper will respond to two letters. One is from a reader in California, who wonders why therapists so doggedly persist in performing "recovered-memory" therapy. The other letter inquires about the recurring theme of whether parents should forgive a child who refuses to apologize for his or her accusations.



From a brochure of the American Academy of Psychotherapists,
1997 Institute and Conference
**Thought Field Therapy:
A Paradigm Shift**

"Thought Field Therapy (TFT) is revolutionizing psychotherapy. Directed at the body's energy system and thought fields, TFT heals at a fundamental level and is rapid and thorough in its effect. It is psychotherapy at the quantum level. TFT uses energy meridian treatment points used in Oriental cultures since ancient times. Stimulating those points in an appropriate ordered sequence provides dramatic rapid improvement in individuals suffering from trauma, anxiety, addictive urges, phobias, and more. This workshop will train participants in TFT trauma treatment and give them the opportunity to see and experience this powerful therapy (CE:3)"

Am Psychological Assn credit available

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Sophie's Peas: Waiting for their return

By Helen Cowles

In our part of the world, around Tucson, Arizona, gardening is not for the faint of heart. The land, parched for so much of the year, yields very little in the way of leaf mulch or dried grasses—in short, the organics are missing in our soils. The animal life, too, is in constant need. When creatures discover our gardens, so carefully mulched, manured, composted, and watered, they greedily devour everything they can reach. Birds swoop down on each newly seeded row, so that the gardener has to plant two seeds for each plant he hopes to harvest. At least two. And that's a good crop of peas or tomatoes or whatever, the weather will suddenly turn scorchingly hot—in March or April, no less, and the vegetables will wither on the vine.

So what keeps us gardening? By some miracle, we manage to hit it big with at least one crop each year. One year, I had Bibb lettuce—here on this rocky mountainside—from January all the way through March. Another year, the wind and the birds had seeded the dill all over the yard. I picked the delicate fronds from between the gravel mulch for all my early spring salads. (Aphids later got all the dill that came up in the proper places in the garden.)

And then there was the spring of the English peas. I had planted them in early January, not hoping for much. The birds must have still been south, though, because the germination rate was just spectacular. The weather stayed blessedly cool that year—all through February. I had to wear several layers to keep warm when I rode horseback in the mountains. I watched my peas bloom, set fruit, and begin to swell. I should say, we watched them, because my exquisite little Sophie, my daughter's child, watched with me, as I told her how wonderful they would taste. She was only three, and I had to help her climb over the timber that surrounded my tiny garden. I had laid a board from one raised bed to the other, and she would place her rounded little frame squarely on the improvised seat and watch me weed. As the peas grew large enough to eat, I would pick them and pod them, then fill her cupped little hands with them. She would chomp them down and ask for more.

And then, it ended. My daughter, for her own reasons, went to see a therapist, a woman with her master's degree in social work, who had taken some courses in "women's issues." After helping my daughter recover some traumatic "lost" memories, she recommended that my daughter separate herself from all of this family that would not—could not—believe what did not happen. And she took Sophie away.

Sophie is eight now. I have not seen her for half of her life. I still plant peas each January. But there has not been a good year for peas since that time when she was a little girl. One year, the radishes and carrots were wonderful. This past year, the basil amazed us all with its fecundity.

I keep on gardening. I know that when I least expect it, the rains will be just right, the sun will delay exerting its authority on our rocky slopes, and, once again, the peas will thrive. And I will keep a board to span the sides of the raised beds, just in case.

Reprinted from Green Prints, the magazine that shares the human - not the how-to, side of gardening. Information, Green Prints, P.O. Box 1355, Fairview, NC 28730.

M A K E

a

D I F F E R E N C E

This is a column that will let you know what people are doing to counteract the harm done by FMS. Remember that seven years ago, FMSF didn't exist. A group of 50 or so people found each other and today more than 20,000 have reported similar experiences. Together we have made a difference.

California: Parents are helping to get the book Manufacturing Victims into the hands of every sitting judge, commissioner and referee in the County of Santa Cruz, California. Author Tana Dineen has been gracious enough to sign all twelve of the books we requested, a fact we will mention as part of the reason for our follow-up letter to the local "triers of fact" next month. We hope that our effort will help the judges have a better understanding of the limits of what is known and what is taken on faith in psychotherapy.

Michigan: Does your state have a Freedom of Information Act (FOIA)? Our state does, and last December I wrote to the state requesting information on our accusing daughter's therapist. The Chief Freedom of Information Officer responded, giving me information on her licensing status and whether any disciplinary action had been taken against her. He also acknowledged receiving my allegation against her which I had submitted. He sent me a copy of her licensing file and the rules and regulations regarding social workers in the state of Michigan.

The department took no further disciplinary action in this matter, and claimed an exemption from release of further information as this release would constitute an unwarranted invasion of the licensee's privacy.

But the next person who requests information about her will be told about my allegation, and that may lead to something. I encourage others to find out if their state has such a measure.

Tennessee: From time to time, I note parents are unable to make contact with their children. My children would return all the mail I sent.

I hit upon an idea that I use from time to time, especially on urgent matters that I must transmit to my children. Using my computer, I first use minimum type size. Then, since a postal card is five and one-half inches wide, I set the lateral margins on an eight and one-half paper to be one and one-half inches on each side. . . a total of three inches. This allows for copy to extend only five and one-half inches wide.

Then I set the top and bottom margins to three and three-quarters inches each. Eureka! The message is compact, fits the postal card, and I simply scotch tape it to the card and drop it in the mail. The post cards I sent have never been returned.

**Send your ideas to Katie Spanuella
c/o FMSF**

A Connection

Since the Sheriff came to the door some thirteen years ago charging me with abuse of my own daughter whom I had raised myself, I started grinding my teeth, developed a tightness in my stomach and still often cannot sleep at night. When the accusation came, I immediately told the rest of my family. I think my openness was instrumental in winning their universal support during a bitter custody battle. They provided wonderful comfort through my trial, my acquittal and the ensuing years.

For years, I have sent letters to my accusing daughter whom I still love deeply. Generally they were trivial and chatty, but on occasion there would be a little blaming, hurt or anger which only resulted in an outburst from her and another year of silence. Still I persevered. I kept her up on happy family events, our holiday gatherings, but I also wrote her real stories about our tragedies and our family history. I left nothing out. After all, she had grown up in this family. What is a family but shared history and experiences?

From my extensive albums, I occasionally sent old photos to her. I included some of her when she was young and some when she was in high school but also some current family photos. I remarried and my wife helped me with my letters, especially by deleting signs of bitterness from my writings.

After a while, I stopped writing identification on the backs of the photos. I sent older and older photos until she had no recollection who was in them, Aunt _ or Uncle _. One day a letter came. "...Is the second picture of you and your siblings? I say this because the two on the left look like Uncle S and Aunt M. This can only lead me to believe that you are the sec-

ond to the right. You would be the tallest since you were first born...."

Well, I'll be! What a relief after 10 years of separation and animosity. My daughter is now happily married, a teacher and we write regularly and lightly about Cabbages and Kings - still anything but the "elephant in the front room." My tension has lessened and I no longer fume in the shower.

I am not one to dance around subjects. If she eventually wants to visit the family, I feel we must talk about the real issue with a neutral party, someone who doesn't have too many degrees to stand in the way of common sense. This mediator could help us arbitrate our different claims. In the meantime, we enjoy what we have, even if it is banter.

John Stephens

Apologize First

Please add my name to the parents who say "She must apologize and retract first" (From Our Readers, April 1998). That is exactly how I feel. My daughter must retract before she can fully resume her place in our family.

A Mom

Sanctified Memories?

Here is a wrinkle we have not seen reported before: using religion to cloak the "sanctity" of a false memory.

Our son recently reported to us a long 1997 conversation between our accusing daughter and our son and his wife in which they attempted to rationally expose the fallacy of her recovered memory. The conversation ended thus:

Son: I don't see how you can believe this (accusation)!

Daughter: God told me.

When telling us about the conversations, our son said, "What can you say to that?"

This development has come five years after the accusation. We have wondered whether there is any link

between our accusing daughter and her family shifting to a more fundamentalist church or to her original counseling by a clergyman that led to her accusation.

A Mother and Father

Editor's Comment: We recently heard an audiotape of a radio broadcast from New Life Clinics called: "Finding Courage after Sexual Abuse." A response to a telephone caller who described a repeated dream gives some insight as to why a person might come to think that she learned of her abuse from God. The host said: "I told her I thought that it [the dream] was God showing her she can take care of her inner child....It would be godly to nurture that inner child."

There is a section in Victims of Memory, 2nd edition by Mark Pendergrast that examines religious counseling. On page 476 Pendergrast quotes the author of The Wounded Heart, D. Allender: "The denial [of repressed memories] is an affront to God. It assumes that God is neither good nor strong enough to help during the recall process. Ultimately, the choice to face past memories is the choice not to live a lie."

New Life Clinics, Radio Broadcast Tapes,
Series: Finding Courage after Sexual Abuse,
Series # S970602

Before and After

Before

Dear Dad and "M",

It's the day before my wedding and I'm thinking how fortunate I am to have you both. You have both done so much for me and you've always been willing to lend a hand.

Dad, I love you very much and I thank God for you every day. I thank him for giving you the strength to raise me not only as a father but a mother too. I can't begin to tell you how much I appreciate all the love and support you gave me and the little notes we used to leave each morning just to say "I love you!" I'll never forget all that you have done for me.

And "M," you had to come into a household where I was probably not

always willing to accept another person as my mother, but you showed me great love and treated me as your own. You were always there to listen to those girlish things that are easier for women to talk about. I just want to say "Thank you and I love you."

You both have done so much for me through the years and you have put so much into this wedding. We've had our times but that's only natural. Dad and "M," I just want you to know as I embark on a new life that I will always be grateful for the morals and values you have instilled in me and I hope I'm the kind of parent that you have been to me. Again, thank you from the bottom of my heart. "Fred" loves you both very much too, and we both thank you so much for everything.

Love

After
Dad,

I'm writing this letter to request that you meet with me in my therapist's office. I would like to address the past and deal with some important issues that need to be resolved between us. This is my second attempt at requesting you to meet with my therapist and I feel that it is vital that we meet. Please contact my therapist "Mary Ann" by tomorrow night with your answer.

Dear G,

I met with your therapist "Mary Ann" on Friday March 11, 1994 and she handed me a 14- page hand-written letter from you to read.

G, all of the abuse you accused me of is false. I never sexually abused you.

Please remember that I will always love you, but right now I don't like you or what you are trying to do to me and yourself. I hope soon you will be well and yourself again and then I can help you. I pray for you everyday.

God bless you,
Dad

"Shrink to Fit:

Californians are more likely than other Americans to get audited. "Sure. The IRS has to audit all those multiple personalities. Can you imagine what Roseanne's taxes look like? 'I'm sorry, ma'am. Twenty-two different personalities cannot all claim a home office deduction on the same office.'" (Premiere Radio)

Los Angeles Times, April 14, 1998

Laugh Lines; Punch Lines

It Had to be Cash

Over two years ago, I received a long letter from my son detailing every grievance he had about his childhood and teenage years. He reported that his therapists said I was guilty of "non-sexual sexual abuse!" It would be laughable if it were not so painful for all concerned.

My son is in his middle thirties. My ex-husband was included in the therapy but I was not. How can a therapist meet with one parent and not the other? Perhaps she decided to meet the parent who had the ability to pay. My ex-husband told me that when he took out his checkbook, a look of utter panic came on the therapist's face. "No, no, no!" she cried, "I must be paid in cash."

My son told me that his therapist had a Ph.D. degree and was on the staff of a hospital in New York City. Later he told me she had an M.D. degree. How I wish that I had the name of my son's therapist so that I could file a complaint with the state of New York and notify the Internal Revenue Service.

All I have left of my son are photographs and the loving notes and cards he sent me before working with this therapist.

A Mother.

Some Good News

Six years have passed since "Sam's" daughter had accused him of sexual abuse, abuse she had no memories of prior to therapy. During the next two years, the leaders of the denomination for which Sam was a pastor took away his credentials. Sam has been working at a secular job ever since.

Sam called me on Easter Sunday. He had sent his daughter a copy of the cassette tapes of the live radio broadcast in which I was interviewed on "Return to the Word" by Dr. Ed Bulkley. I had sent him these tapes and he then sent them to his daughter. SHOCK! She listened to them.

During the listening to the tapes a light came on. The realization of the lie was made plain to her; her thinking was transformed. Her reasoning was renewed and changed. Weeping, she called her dad, made a full apology and requested the names and addresses of all the denomination's church leaders, and many others that needed to have a letter from her of a full recantation. She asked her dad to help her write the letter and plans to have it notarized. She is desperate to do everything she can to clear her dad's name and reputation, to restore a starving, broken family and all the extended family members.

I wrote a note of my great joy to Sam and his wife "Alice," how happy I am for their daughter and extended family. This made a wonderful Easter for me but most certainly for Sam and Alice!!

Tom Rutherford

Little Fragments of Reality

"My false memories were comprised of things that I had seen in movies and read in books, read in the newspaper, dreamt about, little fragments of reality and fantasy that had been brought all together to make a story that seemed to fit."

Diana Anderson
March 13, 1997

ABC Good Morning America

NOTICES

Call persons listed for info & registration

EASTERN MISSOURI AND SOUTHERN ILLINOIS

**Saturday, September 19, 1998 9 a.m. - 3 p.m.
St. Louis, Missouri**

speakers: The Rutherford Family

Public and FMS family sessions

For information call Karen at 314-432-8789

THE RUTHERFORD FAMILY SPEAKS TO FMSF FAMILIES

*"This video helped me realize what my daughter
went through!" A Dad*
**Don't miss it.
Order form on last page.**

The Power of Suggestion,

**A documentary video produced by Sue Inder
Aired on March 31, 1998.**

Sue writes: My husband was accused in 1993 by his then 30-year old daughter. For two years we tried to figure out what was going on. In 1995 my husband was convicted on nothing more than recovered memory evidence. In 1995 I saw "Divided Memories" by Ofra Bikel and learned about the FMS Foundation. That is when I finally saw the book my husband's daughter had studied, *The Courage to Heal*. I produced this video to help myself and to educate others. It can be used to show on local cable stations.

**The price is \$36.24 U.S. or \$29.70 Canadian
Shaw Cable 11 Penticton, 1372 Fairview Rd,
Penticton, BC, Canada**

**Appearances by: Barry, Beyerstein, Pamela Freyd,
Roma Hart, Michael Kenny, Elizabeth Loftus, Paul
McHugh, Chuck Noah, Richard Ofshe, Jim
Pennington, and Stan Stevens.**

**The address of the web site maintained for FMSF by
Patrick Fitzgerald is: <http://advicom.net/~fitz/fmsf/>**

ESTATE PLANNING

**If you have questions about how to include the
FMSF in your estate planning, contact Charles
Caviness 800-289-9060. (Available 9:00 AM to 5:00
PM Pacific time.)**

RESEARCH PARTICIPANTS WANTED

Experiences of 'recovering' and retracting memories of childhood sexual abuse

Ethical approval for this study has been granted by: False Memory Syndrome Foundation (FMSF), the British False Memory Society (BFMS) and the University of Portsmouth Ethics Committee. **ALL RESPONSES WILL BE TREATED IN THE STRICTEST CONFIDENCE**

Outline of the study:

My name is James Ost and I am currently conducting a PhD on false memories at the University of Portsmouth, England. I am interested in the experiences of retractors, both in the process of 'recovering' a memory and the process of subsequently retracting it. I would therefore appreciate the help of retractors willing to assist in my research by completing a questionnaire about their experiences.

The questionnaire has been designed to be sent by electronic mail. If you would like to participate and help me with this study I would be very grateful if you could simply e-mail me (james.ost@port.ac.uk) and request a copy of the questionnaire. You will then be sent the questionnaire and full instructions on how to complete it via e-mail.

If you would like to help me but would rather not do so via e-mail I can arrange to have the questionnaires sent to you (either on a MAC/PC floppy disk for you to complete if you have access to a computer, or as a standard printed questionnaire). You can obtain these questionnaires in either form by contacting me directly (james.ost@port.ac.uk) and requesting either a disk or printed copy of the questionnaire or, if you prefer to remain completely anonymous, through the FMSF who have kindly agreed to help me with this research. Thank you in advance for your help.

RESEARCH PARTICIPANTS WANTED

Psychologists and psychiatrists at the Johns Hopkins University School of Medicine are seeking volunteer participants. They are seeking adults (age 18+) who have ever claimed to have first forgotten and then remembered childhood physical or sexual abuse, regardless of whether they now believe those memories to be true or false.

This study has been reviewed and approved by the Joint Committee on Clinical Investigation of the Johns Hopkins University School of Medicine and by the Ad Hoc Research Committee of the FMS Foundation.

To volunteer for this study, or for more information, contact the Johns Hopkins investigators directly at (410) 955-3268 or the FMS Foundation at (800) 568-8882 and one of the investigators will call you. *Leave your name, telephone number, and the best time to reach you.*

CONTACTS & MEETINGS - UNITED STATES

ALASKA

Bob (907) 556-8110

ARIZONA

Barbara (602) 924-0975;
854-0404 (fax)

ARKANSAS

Little Rock

Al & Lela (501) 363-4368

CALIFORNIA

Sacramento - (quarterly)

Joanne & Gerald (916) 933-3655

Rudy (916) 443-4041

San Francisco & North Bay - (bi-MO)

Gideon (415) 389-0254 or

Charles 984-6626(am); 435-9618(pm)

East Bay Area - (bi-MO)

Judy (510) 376-8221

South Bay Area - Last Sat. (bi-MO)

Jack & Pat (408) 425-1430

3rd Sat. (bi-MO) @10am

Central Coast

Carole (805) 967-8058

Central Orange County - 1st Fri. (MO) @ 7pm

Chris & Alan (714) 733-2925

Orange County - 3rd Sun. (MO) @6pm

Jerry & Eileen (909) 659-9636

Covina Area - 1st Mon. (MO) @7:30pm

Floyd & Libby (818) 330-2321

San Diego Area

Dee (619) 941-4816

COLORADO

Colorado Springs

Doris (719) 488-9738

CONNECTICUT

S. New England - (bi-MO) Sept-May

Earl (203) 329-8365 or

Paul (203) 458-9173

FLORIDA

Dade/Broward

Madeline (954) 966-4FMS

Boca/Delray - 2nd & 4th Thurs (MO) @1pm

Helen (407) 498-8684

Central Florida - Please call for mtg. time

John & Nancy (352) 750-5446

Tampa Bay Area

Bob & Janet (813) 856-7091

GEORGIA

Atlanta

Wallie & Jill (770) 971-8917

HAWAII

Carolyn (808) 261-5716

ILLINOIS

Chicago & Suburbs - 1st Sun. (MO)

Eileen (847) 985-7693

Liz & Roger (847) 827-1056

Joliet

Bill & Gayle (815) 467-6041

Rest of Illinois

Bryant & Lynn (309) 674-2767

INDIANA

Indiana Assn. for Responsible Mental Health Practices

Nickle (317) 471-0922; fax (317) 334-9839

Pat (219) 482-2847

IOWA

Des Moines - 2nd Sat. (MO) @11:30am Lunch

Betty & Gayle (515) 270-6976

KANSAS

Kansas City - 2nd Sun. (MO)

Pat (785) 738-4840

Jan (816) 931-1340

KENTUCKY

Louisville - Last Sun. (MO) @ 2pm

Bob (502) 367-1838

LOUISIANA

Francine (318) 457-2022

MAINE

Bangor

Irvine & Arlene (207) 942-8473

Freeport - 4th Sun. (MO)

Carolyn (207) 364-8891

MARYLAND

Ellicott City Area

Margie (410) 750-8694

MASSACHUSETTS/NEW ENGLAND

Andover - 2nd Sun. (MO) @ 1pm

Frank (508) 263-9795

MICHIGAN

Grand Rapids Area-Jenison - 1st Mon. (MO)

Bill & Marge (616) 383-0382

Greater Detroit Area - 3rd Sun. (MO)

Nancy (248) 642-8077

Ann Arbor

Martha (734) 439-8119

MINNESOTA

Terry & Collette (507) 642-3630

Dan & Joan (612) 631-2247

MISSOURI*

Kansas City - 2nd Sun. (MO)

Pat 738-4840

Jan (816) 931-1340

St. Louis Area - 3rd Sun. (MO)

Karen (314) 432-8789

Mae (314) 837-1976

Springfield - 4th Sat. (MO) @12:30pm

Tom (417) 883-8617

Roxie (417) 781-2058

MONTANA

Lee & Avone (406) 443-3189

NEW JERSEY (SO.)

See Wayne, PA

NEW MEXICO

Albuquerque - 1st Sat. (MO) @1pm

Southwest Room - Presbyterian Hospital

Maggie (505) 662-7521(after 6:30pm) or

Sy (505) 758-0726

NEW YORK

Westchester, Rockland, etc. - (bi-MO)

Barbara (914) 761-3627

Upstate/Albany Area - (bi-MO)

Elaine (518) 399-5749

Western/Rochester Area - (bi-MO)

George & Eileen (716) 586-7942

NORTH CAROLINA

Susan (704) 481-0456

OHIO

Cleveland

Bob & Carole (440) 888-7963

OKLAHOMA

Oklahoma City

Dee (405) 942-0531

HJ (405) 755-3816

Rosemary (405) 439-2459

PENNSYLVANIA

Harrisburg

Paul & Betty (717) 691-7660

Pittsburgh

Rick & Renee (412) 563-5616

Montrose

John (717) 278-2040

Wayne (Includes S. NJ) - 2nd Sat(MO)@1pm
Jlm & Jo (610) 783-0396

TENNESSEE

Wed. (MO) @1pm

Kate (615) 665-1160

TEXAS

Houston

Jo or Beverly (713) 464-8970

El Paso

Mary Lou (915) 591-0271

UTAH

Keith (801) 467-0669

VERMONT

(bi-MO) Judith (802) 229-5154

VIRGINIA

Sue (703) 273-2343

WASHINGTON

Phil & Suzl (206) 364-1643

WEST VIRGINIA

Pat (304) 291-6448

WISCONSIN

Katie & Leo (414) 476-0285

Susanne & John (608) 427-3686

CONTACTS & MEETINGS - INTERNATIONAL

BRITISH COLUMBIA, CANADA

Vancouver & Mainland - Last Sat. (MO)

@1-4pm

Ruth (604) 925-1539

Victoria & Vancouver Island - 3rd Tues. (MO)

@7:30pm

John (250) 721-3219

MANITOBA, CANADA

Winnipeg

Joan (204) 284-0118

ONTARIO, CANADA

London - 2nd Sun (bi-MO)

Adriaan (519) 471-6338

Ottawa

Eileen (613) 836-3294

Toronto /N. York

Pat (416) 444-9078

Warkworth

Ethel (705) 924-2546

Burlington

Ken & Marina (905) 637-6030

Sudbury

Paula (705) 692-0600

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Alain (514) 335-0863

St. André Est.

Mavis (514) 537-8187

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FMS ASSOCIATION fax-(972) 2-625-9282

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Herlinneringen

Anna (31) 20-693-5692

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Colleen (09) 416-7443

SWEDEN

Ake Moller FAX (48) 431-217-90

UNITED KINGDOM

The British False Memory Society

Roger Scatford (44) 1225 868-682

(*) - see the State Meetings List, page 17
 Deadline for the July/August Newsletter is June 15
 Meeting notices MUST be in writing and should be
 sent no later than two months prior to meeting.

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June 1, 1998

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Do you have access to e-mail? Send a message to
pjf@cls.upenn.edu

If you wish to receive electronic versions of this newsletter and notices of radio and television broadcasts about FMS. All the message need say is "add to the FMS list". You'll also learn about joining the FMS-Research list: it distributes research materials such as news stories, court decisions and research articles. It would be useful, but not necessary, if you add your full name: all addresses and names will remain strictly confidential.

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